Approved For Release 2006/09/25 : fCIA-RDP75-00399R0						CONTROL NO.		
PREPARE IN DUPLICATE						OL/SD/_/SPB-1		
1. TITLE OF REPORT (if a fill-in report include Form No.)						VISTATISTICAL		
Monthly Statistical Report					. OF	T HARRATIVE	-	
Monthl		PERSONNEL	7241011	10		MACHINE-NAME L	ISTING	
3. FUNCTIONAL AREA		OGISTICS		TRAINING SECURITY		GENERAL (specify)		
		MEDICAL FINANCE		1 1				
4. NO. OF COPIE	3 PREPARED 5	• FREQUENCY (week!	y, monthly, quar	terly, etc.)	6. DISTRIBUT	10N (No. of component	s not	
3		MONTHLY		1	2			
		. ADP PROCESSING			RECTIVE AUTHO	RITY REQUIRING REPORT		
computer pri MEMO	nt-out, etc)	X 110 IF YES G	IVE ADP PROCESS	NG NO. C7	SD			
	MPONENT (incluinformation t	de lowest level	11. FEEDER R	EPORTS (State or nomenclat	total number a	and identify by Title, separate sheet if nece	essarv.	
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CDEC,	PRO. UNI	ተ ጥ	NONE	÷				
Sric.	FRO. ON			ACTORS				
		A. MANUAL			N COSTS		tandaranin in nyaéta dingan	
HOURLY HOURS PER			COST PER	TIMES	2	COST PER YEAR		
	RATE	REPORT	REPORT	PREPARED				
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	•			36 hrs				
		B. COSTS	OF COMPUTER	PRODUCED R	SPORTS			
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·			L.,		·			
		•	TOTAL COST	S PER YEAR	19	6.44		
3. COMPLETE DE	TAILED JUSTIFIC	ATION FOR THIS REP	ORT (in additio	n to directive	or authority	cited in item 9). IF	кноми,	
INCLUDE DATE	REPORT WAS FI	IRST STARTED AND CO	OMPONENT WHO EST	ABLISHED REQUI	REMENT.			
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